



2017 NONRESIDENT UPPER MISSOURI RIVER PADDLEFISH APPLICATION

Applications must be RECEIVED by FWP
no later than 5:00 pm March 30, 2017

RETURN TO:
MONTANA FISH, WILDLIFE & PARKS
LICENSE SECTION - PADDLEFISH
1420 E 6th AVE
PO BOX 200701
HELENA, MT 59604

FWP 2017 FORM/DEC2016

***YOU MUST HAVE A 2017 CONSERVATION & SEASON FISHING LICENSE TO BE ELIGIBLE TO APPLY.**

MANDATORY INFORMATION Please Print Clearly

DATE OF BIRTH	MM	DD	YYYY	ALS	DATE OF BIRTH IS MANDATORY FOR ALL APPLICATIONS. Your ALS number is your date of birth followed by a 1 to 3 digit number. If you have not applied for or purchased a Montana license you will not have an ALS#. You will be issued an ALS# after your application is processed.					
NAME					JR., SR., ETC.		HOME PHONE		WORK PHONE	
FIRST MI LAST					CITY		STATE		ZIP CODE	
MAILING ADDRESS					CITY		STATE		ZIP CODE	
PHYSICAL ADDRESS					CITY		STATE		ZIP CODE	
SAME AS MAILING <input type="checkbox"/>					CITY		STATE		ZIP CODE	
<input type="checkbox"/> Female	Feet		Inches	WEIGHT	BALD BLACK BLOND	BROWN GRAY RED	BLACK BLUE BROWN	GRAY GREEN HAZEL	<input type="checkbox"/> USA <input type="checkbox"/> OTHER (Please list Country)	
<input type="checkbox"/> Male	HEIGHT				Hair Color (Circle One)		Eye Color (Circle One)		COUNTRY	
Last 4 digits of SOCIAL SECURITY #		OCCUPATION			HUNTER EDUCATION REQUIREMENT Any hunter who is born after January 1, 1985 must submit with all hunting license applications a copy of their certificate verifying that he/she has completed a course in hunter education from any state or province.				DEPARTMENT USE ONLY	
X SIGNATURE OF APPLICANT REQUIRED I am the applicant or have their permission to submit this on their behalf. All statements on this form are true & correct. I understand that if I subscribe to any false statement in this application I am in violation of MCA 87-6-302					FWP receives requests for mailing lists. Do you want your name included on lists provided to requestors? <input type="checkbox"/> YES <input type="checkbox"/> NO NOTE: Even if you choose NO, under state law FWP is required to allow those who wish to compile their own mailing list access to department records, including name, address, gender, residency and whether you were successful.					

By submitting this application you will be put in a drawing for a Upper Missouri River Paddlefish Tag

- * If Successful in drawing, you will be sent a white paddlefish harvest tag and then may harvest a paddlefish according to the paddlefish regulation for 2017.
- * If Unsuccessful, you will be sent a catch/release only license for the Upper Missouri River.
- * If you are successful in drawing the harvest tag or receive a catch & release license for the Upper Missouri River, you are **NOT** eligible to participate in paddlefishing or catch/release for paddlefish in other areas (Fort Peck Dredge Cuts, Missouri River downstream of Fort Peck Dam, or the Yellowstone River).

If you have not purchased your 2017 conservation and season fishing license, you must purchase it at the time of your application

- ☐ 2017 Conservation - \$10.00
- ☐ Paddlefish \$20.00 (including nonrefundable \$5.00 application fee)
- ☐ Season Fishing - \$86.00

PARTY APPLICATION INSTRUCTIONS FOR PADDLEFISH

1. Each party member must submit his/her own completed application and all must arrive in the same envelope.
2. No more than 5 people may apply as a party.
3. Applications in error will be removed from the party and remaining applications will be processed as a party.

☐ If applying as a party check box to the left. Print your **name** along with the other party members below.

Number in Party 1) _____ 2) _____
3) _____ 4) _____ 5) _____

REMEMBER

- * Nonresidents must pay by money order or cashiers check
- * Applications may be mailed or hand delivered to any FWP office, or apply "ON LINE" through our Web site at fwp.mt.gov.
- * Have you completed all the boxes and signed your application?
- * **SEND CASH AT YOUR OWN RISK**

NONRESIDENTS MUST PAY BY MONEY ORDER OR CASHIERS CHECK

Make check payable to: MONTANA FISH, WILDLIFE & PARKS

CHECK # _____

PAYMENT AMOUNT \$ _____